

FORM
PSE

ALABAMA DEPARTMENT OF REVENUE
Extension Request For The Alabama
Business Privilege Tax Return and Annual Report

2005Type of business entity (*must check one*):**C Corporation**

- Regular C Corporation
 Insurance Company
 Financial Institution Group Member
 LLE Taxed as Corporation

S Corporation

- Regular S Corporation
 Insurance Company
 Financial Institution Group Member
 LLE Taxed as Corporation

Other

- Real Estate Investment Trust
 Limited Liability Entity
 Business Trust
 Disregarded Entity

For Determination Period:

Beginning

 /

 /

(mm/dd/yyyy)

Ending

 /

 /

(mm/dd/yyyy) CY (Calendar Year) FY (Fiscal Year) SY (Short Year)

LEGAL ENTITY NAME (PLEASE TYPE OR PRINT)

MAILING ADDRESS

FEIN

CITY, STATE, AND ZIP CODE

(This Space For Use By Alabama Department of Revenue)

FEDERAL BUSINESS CODE NUMBER (NAICS)

DOES THIS REPRESENT A CHANGE
OF ADDRESS? Yes**RECEIVING STAMP**

- | | | |
|--------------------------------------------------------------------------------|--------------------------|--|
| 1 Secretary of State annual report fee \$10 (corporations only)..... | 1 | |
| 2 Privilege tax due (minimum \$100)..... | 2 | |
| 3 Payment due (sum of lines 1 and 2) | 3 | |
| 4 If payment made through Electronic Funds Transfer (EFT) check this box. | <input type="checkbox"/> | |

 I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.**UNDER PENALTIES OF PERJURY**, I declare that I have examined this return and accompanying schedules and statements and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.**Please Sign Here**

Your Signature

Title

Date

Paid Preparer's Use Only

Preparer's signature

Date

Phone number

Preparer's social security no.

Firm's name (or yours,
if self-employed)
and address

Telephone ()

E.I. No.

ZIP Code

MAIL TO: Alabama Department of Revenue, Business Privilege Tax Section, PO Box 327431, Montgomery, AL 36132-7431**Extension Requirements**The Department will grant an extension of time, not to exceed six months, for filing the Business Privilege Tax return provided:

- A 1. The Extension Request (Form PSE) is received by the Department or postmarked by the U.S. Post Office on or before the due date, and
- H 2. A payment of 90% (but in no case less than \$100.00) of the tax liability is made with the request. Corporations must also pay the \$10.00 Secretary of State's fee, and
- C 3. All sections of the Extension Request are completed, and
- K 4. The Extension Request is signed.
- An extension of time for filing an initial return is not allowed.**

Due Dates**BUSINESS PRIVILEGE TAX** – Taxpayers who report on a calendar year basis will file their extension request or tax return on or before March 15, 2005 for corporations or April 15, 2005 for LLE's.Taxpayers who have a tax year other than a calendar year must

file an extension request or tax return no later than two and one-half months if a corporation or three and one-half months if an LLE, after the beginning of each fiscal or short tax year.

If you have any questions, please contact the Business Privilege Tax Section at (334) 353-7923. (www.ador.state.al.us).**Electronic Funds Transfer
Tax Payment and Filing**Section 41-1-20, **Code of Alabama 1975**, requires the use of Electronic Funds Transfer (EFT) for all tax payments of \$25,000 or more. Taxpayers must register to use EFT. Call the Revenue Department EFT Hotline at 1-800-322-4106 or (334) 242-0192 for further information.

If payment is made by EFT, mail completed return to:

Alabama Department of Revenue
EFT Unit
P.O. Box 327950
Montgomery, AL 36132-7950**NOTE: Effective for tax year 2005, the Form PSA has been discontinued. It has been replaced with Form CPT for C-corporations and Form PPT for pass through Entities.**